

December 19, 2018

Issue 6

### **Rx Safe Humboldt Celebrates 5 years - Meet our Heroes**

In November of 2013, we convened a meeting of community stakeholders to look at Humboldt County's data on opioid-related deaths. We heard about what local medical groups as well as San Diego and North Carolina were doing to reduce the harmful effects of opioid over-prescription and misuse. A call to action at that meeting resulted in the formation of multiple work groups, and the coalition at large has met monthly ever since.

Though this is, in a way, never-ending work, we are proud of what's been accomplished. So many individuals and organizations have contributed that it would not be possible to list them all, but we want to recognize a sampling of our colleagues and express gratitude for their leadership and generosity. This is volunteer work for everyone and added onto their busy schedules.

**Bill Hunter, MD**, has led efforts to increase the capacity of MAT in Humboldt County, through growth of existing programs at Open Door and support of newly waived providers and new locations for MAT, including inpatient and ED. He has also helped create our own community safe-prescribing guidelines and serves on the Opioid Safety Review committee. He shares his expertise and experience and always brings a compassionate perspective to the challenges of caring for patients with pain.

**Bryan Coleman, RPh** is responsible for the first medication disposal bin which accepts controlled substances being installed, at Cloney's in 2015. Thanks to his leadership, there are now a total of 12 such bins throughout the county. Bryan educates fellow pharmacists about dispensing of Narcan, and of their role in recognizing and curbing misuse of pain medications. His knowledge is invaluable to several committees.

**Brandie Wilson** is the director of Humboldt Area Center for Harm Reduction. She and her team perform syringe exchange, naloxone distribution, and numerous other services to largely houseless populations throughout the county. HACHR reports an impressive number of overdose reversals, communicable disease testing, and connections to care for treatment of Hepatitis C and substance use disorder.

**Glenn Siegfried, MD and Donna McQueen, RN** have worked since our efforts began to improve treatment of pain and opioid dependence in our Emergency Rooms. Glenn worked on an opioid prescribing policy and communicated it to all local hospitals. They have both done extensive peer education and work to identify opportunities to help patients at risk and to increase naloxone distribution in the ED. They each serve on the Communication and Care Coordination workgroup.

**Don Baird, MD**, has provided consistent leadership in this area as both the County's Public Health Officer and a long-practicing physician. He is one of our trained Academic Detailers and has logged many miles across the county to meet with and mentor numerous clinics and providers. Don is also meeting with **Lieutenant Dennis Young** from the Coroner's Office in an effort to study and learn from the many drug-related overdose deaths in Humboldt County. He serves on the Opioid Safety Review Committee.

**Dana Murguia, MBA**, leads the Marketing workgroup which meets regularly to plan community events and design and distribute educational materials throughout Humboldt County. Thanks to Dana, Rx Safe Humboldt is able to combine its efforts with those of our Public Health Department. Dana also helped plan our second website, [www.StopOverdoseHumboldt.org](http://www.StopOverdoseHumboldt.org).

**Karen Ayers, ACNP**, leads the Communication and Care Coordination workgroup, where she is able to leverage her extensive experience in both inpatient and outpatient realms. She is a recognized leader in the local mid-level community and is one of our Academic Detailers.

**Kate Cruz, Pharm D, and Terry Lerma, Pharm D**, of St. Joseph Hospital have been critically helpful in making inpatient pain medication protocols safer and in developing all the complex processes necessary to begin offering inpatient buprenorphine induction.

**Beth Wells and Anna Owings-Heidrick** have led the Overdose Prevention workgroup, and along with their many colleagues at DHHS/Public Health Department they have trained many individuals and groups on overdose recognition and naloxone use. Thanks to their patient and professional approach---and distribution of free naloxone---this life-saving treatment is now available through the Sheriff's Department, numerous other law enforcement agencies, schools, businesses, and even our public library (whose staff successfully reversed an overdose on their premises several years ago!).

**Sarah Nelson, MSc**, with Healthy Communities at DHHS, manages the Academic Detailing grant. She also leads, along with **Christy Fausone**, the Communities Against Abuse of Prescription Drugs, part of the Allies Against Substance Abuse.

**Ron Largusa, MSPH**, epidemiologist with DHHS-Public Health, provides us all with regularly updated data and useful analysis of trends in prescribing, overdose, etc.

So many other critically helpful individuals and organizations have been involved; they cannot all be named. Thanks to Partnership Health Plan, Open Door Community Health Centers, Waterfront Recovery Services, Aegis Treatment Centers, the Meth and Opioid Community Task Force, and many others. Rx Safe Humboldt strives to keep all efforts aligned and aware of each other. Over the years, this has allowed us to combine, coordinate, and amplify our work, and takes advantage of one of Humboldt County's greatest attributes: friendly and productive working relationships.

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## Prescribing Naloxone: One of the many new opioid safety legislation in California

A new law ([AB2760](#)) which requires clinicians to co-prescribe naloxone with opioids goes into effect on January 1, 2019. Failure to comply with details below may lead to a Medical Board action.

## What is in this Issue

### Prescribing Naloxone

A prescriber shall do the following:

- Offer a prescription for naloxone hydrochloride or another drug approved by the United States Food and Drug Administration for the complete or partial reversal of opioid depression to a patient when one or more of the following conditions are present
  - The prescription dosage for the patient is 90 or more morphine milligram equivalents of an opioid medication per day.
  - An opioid medication is prescribed concurrently with a prescription for benzodiazepine.
  - The patient presents with an increased risk for overdose, including a patient with a history of overdose, a patient with a history of substance use disorder, or a patient at risk for returning to a high dose or opioid medication to which the patient is no longer tolerant
- Consistent with the existing standard of care, provide education to patients receiving a prescription under paragraph (1) on overdose prevention and the use of naloxone hydrochloride or another drug approved by the United States Food and Drug Administration for the complete or partial reversal of opioid depression.
- Consistent with the existing standard of care, provide education on overdose prevention and the use of naloxone hydrochloride or another drug approved by the United States Food and Drug Administration for the complete or partial reversal of opioid depression to one or more persons designated by the patient, or, for a patient who is a minor, to the minor's parent or guardian.
  - This section does not apply to a prescriber when prescribing to an inmate or a youth under the jurisdiction of the Department of Corrections and Rehabilitation or the Division of Juvenile Justice within the Department of Corrections and Rehabilitation.

[Webinar - California's New Opioid Safety Legislation](#)

[Legislation Resource List](#)

[Legislation Summary Guide](#)



### **We Need to Talk About Benzodiazepines - Including Their Use in Drug Combinations.**

By Kat Humphries

Opioids like heroin and fentanyl have grabbed the media and

legislative spotlight—from soaring overdose fatalities to the misguided prescription restrictions and drug-induced homicide laws ostensibly intended to combat them. What's glossed over is that our overdose crisis primarily relates to *polysubstance* use.

Around 80 percent of deaths involving a synthetic opioid in 2016, for example, also involved another drug. When we only focus on partial data, we only come up with partially effective solutions. With our cultural narrative failing to acknowledge this, people who use drugs need to make the effort to learn more to keep ourselves safer.

[Read Full Article Here](#)

[We Need to Talk About Benzodiazepines](#)

## **Valuable Resources**

[Podcast: Finding Fixes](#)

[Accelerating Opioid Safety AMBULATORY CARE TOOLKIT](#)

[Our Pathways to Health Workshops](#)

[Morphine Equivalent Calculator](#)

[Safe Prescribing Guidelines](#)

[Medication Disposal Bins locations Flyer](#)

[Complete Reference Manual for Assessment and Treatment of Acute and Chronic Pain](#)

## **Up Coming Events**

Rx Safe Humboldt Coalition Meeting is Friday, January 25, 2019 from 8:30-9:30 am

[The Connection HPRC Calendar of Events](#)

[Save the Date April 26, 2019 Opioid Safety Conference at the River Lodge in Fortuna](#)

## Academic Detailing

More than 1 in 10   
American adults experience chronic pain

>> Chronic pain is defined as pain that lasts >3 months



Our team of opioid and chronic pain academic detailers have been making the rounds all over Humboldt County to support physicians. Our curriculum spans topics such as: Informed consent, Assessments, Prescription Drug Monitoring Program (CURES), Naloxone, and Opioid Use Disorder Management. We are available to meet one-on-one or in a group setting like an all-staff meeting. We tailor our discussion to fit the time you have available, from 15 minutes to 1 hour, we are willing to meet you where you are at.

If you or someone you know is interested in talking with our team of academic detailers, please contact Dr. Mary Meengs by [email](#).

Visit our Website